



## DECLARATION AND POWER OF ATTORNEY

As the below-named inventor, I declare that:

My residence, post office address, and citizenship are as stated below under my name.


I believe I am the original, first, and sole inventor of the invention entitled "SINGLE-SHEET REGISTRATION FORM AND KEY PACKET," which is described and claimed in the specification and claims of Patent Application No. 09/499,069, which I filed in the United States Patent and Trademark Office on February 4, 2000 and for which a patent is sought.

I have reviewed and understand the contents of the above-identified specification and claims, as amended by any amendment specifically referred to herein (if any).

I acknowledge my duty to disclose information of which I am aware which is material to the patentability and examination of this application in accordance with 37 C.F.R. § 1.56(a).

I hereby appoint, ROBERT W. BERGSTROM, Registration No. 39,906; of the firm of WEISS JENSEN ELLIS & HOWARD, 2600 Pike Tower, 520 Pike Street, Seattle, Washington 98101, as my attorney to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Please direct all telephone calls to ROBERT W. BERGSTROM at (206) 340-1825 and telecopies to (206) 623-4363.

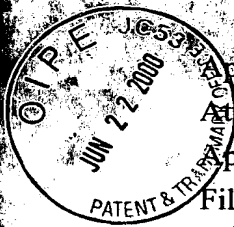
I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that the making of willfully false statements and the like is punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and may jeopardize the validity of any patent issuing from this patent application.

  
Ted Eugene Wright

Date 5-17-2000

Residence : City of Escondido, County of San Diego  
State of California  
Citizenship : United States of America  
P.O. Address : 8707 Gracilior Place  
Escondido, California 92026

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant: Ted Eugene Wright  
 Attorney's Docket No.: 77017.002  
 Application No.: 09/499,069  
 Filed: February 4, 2000  
 For: SINGLE-SHEET REGISTRATION FORM AND KEY PACKET

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS  
 (37 C.F.R. §§ 1.9(f) AND 1.27(c)) -- SMALL BUSINESS CONCERN**

I declare that I am:

- ☒ the owner of the small business concern identified below.  
☐ an official of the small concern empowered to act on behalf  
 of the concern identified below.

NAME OF CONCERN: Electronic Forms Plus  
 ADDRESS OF CONCERN: 11440 W. Bernardo Ct., Suite 155  
San Diego, California 92127

I declare that the above-identified small business concern qualifies as a small business concern as defined in 13 C.F.R. §§ 121.3-18 and reproduced in 37 C.F.R. § 1.9(d) for purposes of paying reduced fees under 35 U.S.C. §§ 41(a) and 41(b) in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I declare that rights under contract or law have been conveyed to and remain with the small business concern with regard to the invention entitled:

**SINGLE-SHEET REGISTRATION FORM AND KEY PACKET**

by inventor: Ted Eugene Wright  
 as described in:

- ☐ the specification filed herewith.  
☒ Application No. 09/499,069, filed February 4, 2000.  
☐ Patent No. \_\_\_\_\_, issued \_\_\_\_\_.

If the rights held by the small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the

invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 C.F.R. § 1.9(c) or by any concern which would not qualify as a small business concern under 37 C.F.R. § 1.9(d) or a nonprofit organization under 37 C.F.R. § 1.9(e).\*

\*NOTE: Separate verified statements are required from each named person, concern and organization having rights to the invention averring to his/its status as a small entity. (37 C.F.R. § 1.27)

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

- ☐ individual  
☐ small business concern  
☐ nonprofit organization

FULL NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

- ☐ individual  
☐ small business concern  
☐ nonprofit organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earlier of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 C.F.R. § 1.28(b))

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that the making of willfully false statements and the like is punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: \_\_\_\_\_ Ted Eugene Wright \_\_\_\_\_

TITLE OF PERSON OTHER THAN OWNER: \_\_\_\_\_

ADDRESS OF PERSON SIGNING: \_\_\_\_\_ 8707 Gracilior Place \_\_\_\_\_

Escondido, California 92026

SIGNATURE: \_\_\_\_\_ *Ted Eugene Wright* \_\_\_\_\_

DATE: \_\_\_\_\_ 5-17-2000 \_\_\_\_\_

**ALL-PURPOSE ACKNOWLEDGMENT-CALIFORNIA ONLY**

State of California

County of San Diego

On 5/17/00 before me, Krista L Formo, Notary Public,  
DATE

personally appeared Ted Eugene Wright  
NAMES(S) OF SIGNER(S)

- ☐ personally known to me - **OR** - ☒ proved to me on the basis of satisfactory evidence to be the person(~~s~~) whose name(~~s~~) is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity(~~ies~~), and that by his/~~her/their~~ signature(~~s~~) on the instrument the person(~~s~~), or the entity upon behalf of which the person(~~s~~) acted, executed the instrument.



WITNESS my hand and official seal

Krista L. Formo  
SIGNATURE OF NOTARY PUBLIC

**Description of Attached Document (OPTIONAL)**

Title or Type of Document: Declaration and Power of Attorney

Document Date: 5/17/00 Number of Pages: 1

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer  
Title(s): \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Attorney-In-Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

RIGHT THUMBPRINT  
OF SIGNER  
TOP OF THUMB HERE

Signer is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer  
Title(s): \_\_\_\_\_  
☐ Partner ☐ Limited ☐ General  
☐ Attorney-In-Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

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State of California

County of San Diego

On 5/17/00 before me, Krista L Formo, Notary Public,

personally appeared Ted Eugene Wright

NAMES(S) OF SIGNER(S)

☐ personally known to me - OR -

☒ proved to me on the basis of satisfactory evidence to be the person~~(s)~~ whose name~~(s)~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~(s)~~ on the instrument the person~~(s)~~, or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.



WITNESS my hand and official seal.

Krista L. Formo  
SIGNATURE OF NOTARY PUBLIC

## Description of Attached Document (OPTIONAL)

Title or Type of Document: Verified Statement

Document Date: 5/17/00

Number of Pages: 2

Signer(s) Other Than Named Above: \_\_\_\_\_

## Capacity(ies) Claimed by Signer(s)

Signer's Name: \_\_\_\_\_

- ☐ Individual  
☐ Corporate Officer

Title(s): \_\_\_\_\_

- ☐ Partner ☐ Limited ☐ General  
☐ Attorney-In-Fact  
☐ Trustee  
☐ Guardian or Conservator  
☐ Other: \_\_\_\_\_

Signer is Representing: \_\_\_\_\_

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☐ Other: \_\_\_\_\_

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